

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.
10689645
APPLICANT(S)

FILING DATE
10-22-03

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2		1				
3		1				
4		1				
5		1				
6	1					
7		1				
8		1				
9		2				
10		①				
11		②				
12	1					
13		1				
14		1				
15		1				
16		1				
17	1					
18		2				
19		2				
20		2				
21	1					
22		1				
23		1				
24		1				
25	1					
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46						
47						
48						
49						
50						
TOTAL IND.	6					
TOTAL DEP.	23					
TOTAL CLAIMS	29					

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						